VIRGINIA DEPARTMENT OF HEALTH - OFFICE OF EMERGENCY MEDICAL SERVICES

BASIC LIFE SUPPORT - PRACTICAL SKILL TEACHING SHEET

SPINAL IMMOBILIZATION - STANDING SPINEBOARD

SCENE SIZE-UP

Assess: Need for body substance isolation, Scene safety, Trauma (MOI) or Medical (NOI) nature,

and Number of Patients

ASSESSMENT

Perform initial assessment and appropriate rapid, focused or detailed assessment as indicated.

EMERGENCY MEDICAL CARE

Establish and maintain in-line immobilization; maintain until patient is properly secured to spineboard with head immobilized.

Assess pulse, motor and sensation in all extremities and record findings.

Assess the cervical region and neck; apply proper size cervical immobilization collar.

Position spineboard behind the patient.

Move the patient onto the spineboard by:

- 1. One rescuer on each side of the patient, one additional rescuer at the foot facing the patient.
- 2. The rescuers on both sides of the patient reach with the hand closest to the patient under the arm to grasp the spineboard, and use the hand farthest from the patient to secure the spineboard.
- 3. Once the position is assured, they place the leg closest to the spineboard behind spineboard and the patient to prevent them from sliding, and the spineboard is brought into a level horizontal position.

Pad voids between the patient and the spineboard.

Immobilize torso to the spineboard.

Immobilize the patient's head to the spineboard.

Secure legs to the spineboard.

Reassess pulses, motor and sensation and record findings.

Move spineboard and patient to stretcher.

Secure long spineboard and patient to the stretcher.